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<b>Cynthia M. Branca</b>	(Depositor's name)
<i>Cynthia M. Branca</i>	(Signature)
<b>April 13, 2005</b>	(Date)

APPLICATION NO.	FILED DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/973,335	10/09/2001	Barbara A. Soliz	P00594-US	6202

**TITLE OF INVENTION:** COMPOSITE TISSUE ADHESIVE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	05/25/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
PANTUCK, BRADFORD C	3731	606-214000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
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**Barlow, Josephs & Holmes, Ltd.**

#### 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**Tissue Adhesive Technologies, Inc.**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**81 Pine Brook Road**  
**Spring Valley, NY 10977**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

#### 4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
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#### 5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims **SMALL ENTITY** status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming **SMALL ENTITY** status. See 37 CFR 1.27(g)(2).

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Authorized Signature Stephen J. Holmes

Date 04/13/2005

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**BARLOW, JOSEPHS &  
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**Ex**

<b>To:</b> Issue Fee	<b>From:</b> Cynthia Branca
<b>Fax:</b> 703-746-4000	<b>Pages:</b> 3 including cover sheet
<b>Phone:</b>	<b>Date:</b> 04/15/2005
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**Applicant:** SOLTZ, Barbara  
**Title:** COMPOSITE TISSUE ADHESIVE  
**S/N:** 09/973,335

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1. Notice of Allowance and Fees Due
2. Part B Fee Transmittal with authorization to charge Deposit Account
3. Credit Card Payment Form